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BIBDATASHEET**CONFIRMATION NO. 1669**

Bib Data Sheet

SERIAL NUMBER 10/774,434	FILING DATE 02/10/2004 RULE	CLASS 359	GROUP ART UNIT 2873	ATTORNEY DOCKET NO. 012.43208X00
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APPLICANTS

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** CONTINUING DATA *****
NONE JH

** FOREIGN APPLICATIONS *****
NONE JH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 05/06/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 4	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Jison</i> Initials <i>JH</i>				

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TITLE
One piece clear plastic cardholder, cardholder shaped fresnel magnifying lens and method of making the same

FILING FEE RECEIVED 430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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